

# NET

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# NET2016

## **27th International Networking for Healthcare Education Conference**

**Tuesday 6 – Thursday 8 September 2016**

Churchill College, University of Cambridge CB3 0DS, UK

### Group 2 of theme sessions

Wednesday 7 September 2016

Student experience and engagement

Core paper and theme paper abstracts



# Group 2 of the theme sessions

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**Please note:**

Abstracts and references are as supplied by authors

USA and Australian spelling has been retained as appropriate

Papers included are those being presented at the conference at the time of going to press.

# Core paper

## Biographical details of core presenter

Judith Barbaro-Brown, Head of Programme Interdisciplinary CPD, York St John University, UK

**Judith Barbaro-Brown** qualified from Durham School of Podiatric Medicine in 1989, and worked in a number of north-east NHS trusts, before returning to the Durham School as a lecturer. During this time she led the development of a national continuing professional development (CPD) programme for a range of allied health professionals. From 2007-2015 Judith lectured at Durham University on Phase One Medicine, and during this time she also worked with the Department of Health on an independent prescribing project, and was senior academic advisor for a number of educational bodies. She also was involved in researching student experience in relation to transition into higher education, being part of a cohort of high-ability students, and use of simulation in teaching.

In 2015 Judith moved to York St John University as Head of Programme for Interdisciplinary CPD, and is responsible for overseeing CPD delivery for a wide range of healthcare professionals. She continues to be a guest speaker and facilitator at numerous conferences and national/international events, and presents to professional groups, branches, and NHS groups. She also continues to act as a professional and educational advisor to a number of professional bodies and training providers throughout the UK. Whilst she maintains her areas of clinical interest in diabetes, tissue viability, and lower limb vascular pathology, her research interests are in the areas of academic self-concept, professional identity development, and student transition.

## From big fish to little fish: Does early course experience influence academic self-concept (ASC) in groups of high-ability students?

Judith Barbaro-Brown, Head of Programme Interdisciplinary CPD, York St John University, UK

### Background and aims

Academic self-concept (ASC) is important in student performance (Chapman *et al.*, 2000), but little is known about its affect in high-ability students learning in competitive environments. The Big Fish Little Pond Effect (BFLPE) (Marsh, 1987) has demonstrated that where high-ability students learn with similar students their academic self-concept is lower than in mixed-ability situations, affecting educational progress. Academic self-concept relates to the perception of one's level of ability within an academic area and is influenced by how one perceives performance of others in the same learning environment (Guay *et al.*, 2004). There is a view that medical students are not affected by comparison with their cohort (Jackman *et al.*, 2011), but there is little research in this specific area on which to confidently base this view. This study aims to investigate how academic self-concept changes over a period of time in a single cohort of medical students and explores student experience of learning in a high ability group. This paper provides an interim report on an ongoing two-year empirical study into the experiences influencing academic self-concept of medical students during the first two years of study within a cohort of highly achieving students, and the impact this has on their academic performance.

### Literature review

Self-concept is the way in which an individual perceives themselves in relation to others, and having a positive self-concept is seen as important not only for general wellbeing but also for academic success (Chapman *et al.*, 2000). Shavelson *et al.* (1976) suggested that self-concept was multidimensional, and could be viewed in two domains – academic self-concept (ASC), and non-academic (dealing with emotions and social behaviour). This was later refined by Marsh and Shavelson (1985) who divided ASC into verbal self-concept and maths self-concept. ASC relates to a person's perception of their own level of knowledge, ability, or skill within an academic area, and can be influenced by how one sees the performance of individuals in the same learning environment – the BFLPE is thought to illustrate this as it relates directly to ASC and much research has demonstrated that a student's level of ASC can influence the type of institution and course they select, their future aspirations, and ultimately their achievement on their chosen course (Guay *et al.*, 2003; Guay *et al.*, 2004; Marsh and Craven, 2006; Chapman *et al.*, 2000; Jackman *et al.*, 2011).

It is clear from the literature that there is a significant amount of evidence supporting the importance of ASC for self-esteem and achievement and their contribution to the BFLPE, but much of this relates to children in compulsory education, or students in post-16 educational settings. In these environments there is usually a range of abilities within a single learning cohort, and therefore it is possible for an individual to see themselves as being more academically able in comparison to colleagues. However, highly achieving students frequently have high aspirations, and those who go on to study medicine will face the reality of being in a cohort of students who have all been highly achieving – they have all been 'the biggest fish in the pond'. In these situations, it has been noted that as highly successful students move into high ability settings, their level of ASC decreases (Marsh *et al.*, 2008).

There is an assumption that all medical students are equally academically orientated and will not be affected by comparison with other able students, and this is explored in Coburn and Jovaisas' 1975 study. They looked at stress in first year medical students, particularly in relation to perceived failure, and found that students feared that they would not be able to manage their learning, or acquire the correct level of knowledge, and the researchers concluded that this was highly damaging to the students' ASC. They also noted that there appeared to be the formation of small sub-groups within the medical cohort consisting of students who were much less certain of their academic competency, either because they were genuinely less able than their counterparts, or because they felt a much greater need to achieve high grades but had no opportunity to compare themselves fairly with their colleagues. The researchers concluded that medical students felt significant stress regarding their academic work, but that there were no mechanisms in place to help prepare students for dealing with this, and that the encouragement of academic competition within medical schools placed unnecessary demands on students. A point to note here is that this study did not mention any influence of differing social background in the formation of the subgroups, and this would seem to be a significant omission, but it is important to remember that issues of social mobility in medicine in order to reflect a more diverse society, and the widening participation agenda, were not as influential in the 1970s as they are today.

Saipanish (2003) also investigated stress in medical students who cited that their leading cause of stress was academic problems, mostly related to tests and examinations, followed by difficulty with course content. Saipanish noted that the atmosphere was highly competitive, and whilst raw assessment scores were similar amongst the students, the grading process created a 'top' and 'bottom' set of students. This allowed students to be compared with each other rather than measuring what the students had learned, which he deemed to be unfair and damaging to their ASC. Saipanish concluded that this grading system created an even more competitive environment which impacted negatively on student peer

support mechanisms and therefore he felt that a better evaluation system was needed. The study sample consisted of roughly equal numbers of male and female students, but there was no difference in academic stress levels reported between the genders. The role of gender in ASC was explored in Matovu's 2012 study involving university students (not specifically medical students). Results indicated that females showed higher academic effort than males, had higher ASC levels and showed higher academic achievement, which contrasted with results from earlier studies (Kling *et al.*, 1999; Hossaini, 2002). The study concluded that in terms of teaching and learning strategies and support, consideration should be given to gender differences as ASC can be influenced by this, and that the level of ASC can be reflected in the student's academic achievement.

A study which directly focuses on ASC in medical students was carried out by Jackman *et al.* (2011). This measured the ASC of 20 first year medical students using the Academic Self Description Questionnaire II (ASD-QII). This was applied before and after the student's first assessment, and was followed by focus groups. The results of the questionnaire were that there was no statistically significant difference between the before and after assessment scores for ASC, suggesting that academic self-concept did not change in this group of students, and their performance in the assessment did not appear to have any effect on their self-concept level. The outcomes from the focus groups also suggested that there was very little change to ASC after assessment, with a number of themes arising which were related to satisfaction with their performance, and an expectation that they could improve this. The major theme was the attribution of poor performance to external factors, such as examination questions being irrelevant, their revision time being too short, or being unsure what to expect. Students also felt that if they had put more effort into their preparation, they would have performed better. The general conclusion from this study was that there was no change in self-concept in medical students, that the BFLPE was not occurring, and that the nature of the programme created a level of competition between students. However, the sample size in this study is relatively small, and involved 20 students from a cohort of 133, and took place within a very narrow time-scale. The authors do acknowledge these limitations, and suggest that this may have been why no significant change was detected. They suggest that future research should involve a larger sample size, over a longer period of time.

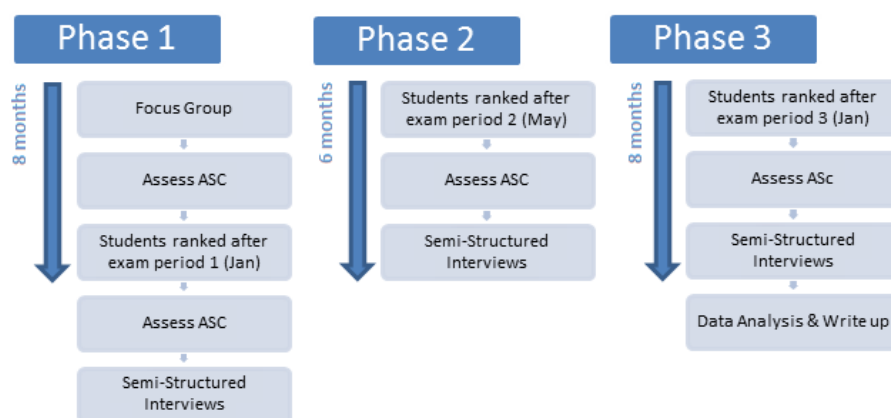
### Methodology and method

Using a constructivist, phenomenographical approach, the study employed mixed methods (in a convergent sequential design) to provide quantifiable data relating to academic self-concept levels using an appropriate and validated tool – the Medical Student Self Description Questionnaire, adapted from the Marsh Self-Description Questionnaire II (ASD-QII; Marsh, 1990) with the permission of the original author. Further quantifiable data was obtained from student rankings after major summative assessment episodes. When combined with qualitative data relating to experiences and perceptions gained through focus groups and semi-structured interviews, there was the opportunity for multi-perspective analysis. Ethical approval for the study was granted prior to commencement.

Students in the first year of undergraduate medicine in a UK medical school were invited to participate. Prior to agreement, they were given information on participation requirements – completion of an academic self-concept questionnaire on a number of occasions over a period of 18 months, with the opportunity to participate in a focus group, and the possibility of being invited to take part in a number of semi-structured interviews. Of a cohort of 92 students, 85 consented to participate in completion of the questionnaire. 15 students self-selected to take part in the focus group, and from the whole sample group, 12 were randomly selected and invited to take part in semi-structured interviews (SSIs). All students taking part in the study provided informed consent and completed an appropriate consent form. Students taking part in the SSIs also completed a separate consent for prior to each interview, giving specific consent for use of their comments anonymously in future publications.

Figure 1 provides a schematic of the data collection plan:

Figure 1.



After the initial focus group, the ASC questionnaire was administered to provide a baseline score per student. The questionnaire was re-administered after every major summative assessment episode, providing a maximum of four scores per student. Students taking part in SSIs were digitally recorded (recordings were stored in accordance with the Data Protection Act 1998, with access limited only to the researcher). Recordings were transcribed verbatim and then coded for emerging themes, which were then clustered into groups.

### Findings to date

Data analysis is currently ongoing. However, initial analysis of the quantitative data (ASC scores) using a paired t-test showed a statistically significant increase in the mean academic self-concept score of the whole cohort ( $p$ -value < 0.001) between the beginning and the end of the study suggesting that students who progress through the first two years of the programme generally experience an increase in their ASC. There was also overall convergence in the actual scores of the whole cohort, with a narrower range of scores at the end of the study (292-497 range = 205) when compared to the beginning (231-466 range = 235). When looked at in terms of gender over the study period, the range of scores widened in males whilst narrowing in females. However it is important to remember that only students who were successful in assessment diets were able to progress and complete all four episodes of ASC measurement; students who failed and left the programme were unable to do this – if their ASC scores had reduced as a result of failure this would not have been recorded in the data.

In terms of qualitative data, participants reported difficulties in learning within a highly competitive environment, and did not wish to share their examination outcomes with other students for fear of ridicule. Even though the top and bottom values of examination results were within a narrow margin students were unable to contextualise this in relation to their position within the group, and those students at the lower end of the rankings initially showed lower ASC scoring. There were six main themes which arose from the data, which were coded as: academic behaviour (AB); feeling safe (FS); resilience (R); tenacity (T); social interaction (SI); and worthiness and self-esteem (W). Within each of these themes were a number of sub-themes but further analysis and interpretation are ongoing and will be reported in future publications and presentations.

### Conclusions to date

ASC increases in medical students as they successfully progress through the programme suggesting that success breeds success. However, the culture and behaviour within the student cohort appears to be an important factor in how students view their learning experience with many students reporting highly competitive behaviours, academic 'game-playing', the withholding of information in order to gain advantage, self-doubt, and peer ridicule. Students reported that this behaviour impacted on whether they felt worthy of their place on the programme, but that there was no 'safe space' in which they could discuss this or share their concerns. A small number of students said this had led them to question their choice of course and future career and that they had considered withdrawing from the medicine programme.

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# Theme papers



## Development and evaluation of the process for final placement application: A review of the new student led allocation system

Rachael Mason, Practice Placement Development Worker; Debra Brackenbury, Student Nurse; Sophie Broady, Student Nurse; Lauren Simpson, Student Nurse, University of Lincoln, UK

### Background, context and evidence-base for the innovation, including, wherever possible, its international relevance

A process to facilitate nursing students to have more ownership of their final placement was introduced for this academic year by inviting them to apply for a specific placement they felt most appropriate. Whilst there has been significant research into preparing students for practice (Woods *et al.*, 2015) and to explore the transition from student to graduate nurse (Kumaran and Carney, 2014), there is little to explore the effect of gaining preference for their final placement or for the development of employability skills. Morrell and Ridgway (2014) explored students' views on their preparedness for final placement finding eight themes, one of which was 'lack of support, and stress'. They suggested a 'factor that can inhibit transition includes a lack of support from the university with job applications.'

### Aim/focus of the innovation

The aim of this study is for students to work within the 'student as producer' ethos and evaluate the new process to explore its effectiveness and review the perceived benefits of the students. With this information, they are refining and developing the process for their cohort. It is vital that we are evaluating its outcomes to enable a positive impact on the student experience. Partners are supportive of this project and the possible impact it may have on their recruitment process and rates. The process will help embed graduate attributes into our students which aims to increase their employability including application skills and CV building. With students producing an application form, they are reflecting on their learning and experiences, increasing their awareness of the skills they have gained and articulating this to the placements team.

### Implementation of the innovation

This project will be implemented by:

1. Creating a robust application process that has been trialled, evaluated and developed by students.
2. Engaging partners with the process and to help aid the transition to registered nurse.
3. Using the results to inform and shape future developments in placement allocation and rolling the process out to the next cohort.

### Methods used to assess the innovation

Evaluation is being conducted by distributing a questionnaire (co-designed by students) to the current final year students which is then collated by the students. Three focus groups or interviews (preference of students) are to be held with five people from three categories (gained their chosen placement, gained a chosen preference, gained a placement outside of their preferences). These groups will focus on their perceived advantages and disadvantages of the process and suggestions for improvement. Quantitative data (from the applications and questionnaires) is being conducted using SPSS. Qualitative data from the focus groups will be evaluated using the framework methods whereby transcripts are coded and themes identified.

### Key findings

All research and analysing of data in terms of the benefit of this process will be completed and written ready for presenting at the conference. We will have a research paper outlining the findings of the evaluation and perceived benefits including possible future developments.

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### Key words:

- student
- experience
- placements

- support
- engagement.

**3 key points to indicate how your work contributes to knowledge development within the selected theme:**

- developing processes together with students as producers
- increasing the student experience through choice of placement
- increasing student employability skills through application practice.

## G2SEE-T2

### **How does the role of trainee mental health workers in clinical practice compare with expectations prior to starting the programme?**

**Charlotte Kirton, Lecturer in Mental Health (Practice); Helen Matheson, Senior Lecturer in Mental Health (Practice); Sandra Connell, Lecturer in Mental Health (Practice); Nicky Lambert, Associate Professor in Mental Health, Middlesex University, UK**

**Background, including underpinning literature and, wherever possible, the international relevance of the research**

The trainee mental health worker (TMHW) programme is an initiative developed collaboratively between Middlesex University and local NHS mental health trusts. This was in response to national workforce developments to employ clinical personnel from a diverse background, with the skills and capabilities to provide mental health services for the future. On successful completion of six academic modules and practice experience in two mental health clinical practice settings, a postgraduate diploma in mental health practice is awarded.

**Aim(s)**

This study is designed to address the feedback given by previous cohorts of trainee mental health workers which indicates a dissonance between their expectations of the practice placement linked to the course and their actual experience. It is hoped that the results will inform the recruitment and selection of TMHWs in the future by highlighting any discrepancies between perceived and actual role of these clinicians. The research may assist employing trusts by helping them to understand this phenomenon and the role itself.

This study aims to:

- identify TMHWs' perceptions of their role prior to practice
- identify TMHWs' experience of role in practice
- identify areas of dissonance in the above areas.

**Data collection**

This is a qualitative study comprising of three rounds of focus groups. Each round involves four focus groups of 6-8 TMHWs. The focus groups investigate participants' expectations of the TMHW role prior to starting the programme and their perceptions/experiences of the role following one and then later two practice placements respectively. Focus groups are semi-structured with a schedule of topic points to be followed.

**Sample**

The sample has been drawn from a population of 60 TMHWs undertaking the programme. Invitation to participate was given following a presentation of the proposed study during induction, with participants self-selecting onto the project. Participants were recruited until the target number was achieved. A total of 32 participants have been recruited. Focus groups have been audio recorded for the purpose of analysis.

**Ethical issues**

The study has been subject to approval by the Middlesex University ethics committee. All participants' responses are anonymised and participants are free to withdraw their data at any time.

**Analysis**

The focus groups will be transcribed by the project team, and will be checked for accuracy. Thematic analysis will be employed and emerging concepts will be grouped into themes. Anonymised participant quotes will be used to illustrate key concepts within themes.

**Key findings and recommendations**

As this study is due to be completed in April 2016 the presentation will report on the initial analysis of findings. It is expected that this study will produce guidance on roles and responsibilities for trainees. This will be in addition to their job description and may assist employing trusts by helping them to understand the role further.

**Key words:**

- practice
- mental health
- experience
- expectations
- clinical trainees.

**3 key points to indicate how your work contributes to knowledge development within the selected theme:**

- in order to improve the student experience this study is designed to address feedback given by previous TMHWs
- this study will highlight any discrepancies between perceived and actual role of these students enabling both academic and clinical staff to address issues of role clarity
- it is anticipated the results will inform recruitment and selection of TMHWs by contributing to the programme teams' awareness of the nature and challenges of the role.

**G2SEE-T3****The experiences of nurses returning to contemporary practice**

**Mary Carter, Course Leader for the Return to Practice (Nursing) Course/Lecturer Adult Nursing, University Campus Suffolk, UK**

**Background, including underpinning literature and, wherever possible, the international relevance of the research**

In response to current and future nursing shortages globally and in the UK, many nurse education providers have refocused attention on preparing nurses with lapsed registration for contemporary nursing practice (HEE, 2014a; 2014b). Return to practice (RTP) programmes in the UK aim to integrate theoretical learning and practice-based components in order to prepare students for rapid reintegration into the nursing workforce. Previous incarnations of successful RTP programmes have arguably benefitted from stable healthcare environments in terms of a lack of volatility in nursing and healthcare, which the existing literature reflects (Asselin *et al.*, 2006; Elwin, 2007; Barriball *et al.*, 2007).

However, the profile of these returning nurses is broad in terms of professional background and years spent away from practice (Abbott *et al.*, 2012), and this phenomenon, against a backdrop of increasing tensions within health service provision and the developing nurses' role, may mean that re-integration – and re-registration – can be a challenging prospect for these individuals (Glasper, 2014). Furthermore, RTP providers will be cognisant of the importance of developing programme strategies that address recruitment and retention and a 'return on investment', and this expectation, coupled with the challenges of transitioning into increasingly pressured practice environments indicate that a re-exploration of the experiences of RTP students may well illuminate this area against a contemporary setting.

**Project**

Exploring the lived experiences of RTP students lends itself to an interpretive hermeneutic phenomenological approach informed by Heideggerian principles, which seek to provide insights into the 'everydayness' of individuals' lives (Miles *et al.*, 2013), and is seen as an authentic means of listening to and understanding the nature of being for others, or their subjective 'life worlds' (Connelly, 2015). Nurses work in environments with common and specific features and interpretive phenomenology offers a means of examining this 'situated context' and how the fusion of context and subjective meanings are related (Sloan, Bowe, 2013). While there is some divergence among phenomenological approaches regarding the relationship between the researcher and perceived bias, hermeneutic phenomenologists such as Gadamer and van Manen acknowledge the connections between researcher presuppositions and the interpretation of findings (Miles *et al.*, 2013), with van Manen further arguing that an absence of the researcher's own experience would limit meaning (Connelly, 2015).

**Findings**

As the course leader of an RTP (nursing) programme in a UK university, this phenomenological research project is anticipated to illuminate students' experiences that will inform and enhance future course development and student experience.

Areas to be explored include the volatility in healthcare provision in the last decade, and the impact on the nurse's role, the experiences of transitioning back into nursing practice, with an emphasis on contemporary practice and the drivers that influence the planning and delivery of an RTP course.

**Key findings and recommendations**

Themes may include:

- stress regarding successful transitioning back to registration
- challenges in adapting to contemporary healthcare since last working in clinical placement
- attitudes to contemporary nursing practice

- experiences of placement support.

N.B. Actual research findings will be finalised by September 2016 and may well diverge from those anticipated.

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## Key words:

- return to nursing practice
- transitions
- experience
- future course development.

## 3 key points to indicate how your work contributes to knowledge development within the selected theme.

Findings are anticipated to:

- illuminate the experiences of nurses returning to practice
- inform mentor preparation regarding the particular needs of RTP students
- inform recommendations for future course development (content and delivery).

## G2SEE-T4

## A survey of third year undergraduate nursing students' perceived readiness for registration

**Martin Christensen, Associate Professor, Queensland University of Technology, Australia; Aimee Aubeeluck, Associate Professor, University of Nottingham, UK; Diana Fergusson, Head of School, Western Institute of Technology, Taranaki, New Zealand; Judy Craft, Senior Lecturer, Queensland University of Technology, Australia; Jessica Knight, Western Institute of Technology, Taranaki, New Zealand; Lisa Wirihana, Lecturer, Queensland University of Technology, Australia; Ed Stupple, Senior Lecturer, University of Derby, UK**

## Background, including underpinning literature and, wherever possible, the international relevance of the research

This study explores the concept of imposter phenomenon (IP) (Clance and Imes, 1978) and discusses the importance of educational strategies for facilitating and improving the student experience as graduating nurses prepare to enter the work force. Preparing for graduation and the 'real life world' of professional nursing practice invokes in many third year nursing students feelings of anxiety, depression and stress. Sometimes referred to as transition shock this is often as a result of expressed feelings of doubt, inadequacy and insecurity (Huffstatler and Varnell, 2006; Mattie, *et al.*, 2008) as to the expectations of the registered nurse role and responsibilities, coupled with the level of knowledge the new graduand is deemed to possess. Despite the emergence of graduate transition programmes whether they consist of preceptorship type models, buddying systems or comprehensive induction/orientation programmes, it is evident that some students will

experience feelings of self-doubt when faced with the reality of being an accountable and responsible registered nurse (Henning and Shaw, 1998; Sonnak and Towell, 2001).

#### **Aim(s) and research questions**

The aim of this study is to examine the extent to which IP is evident in a third year nursing student cohort. Its key objectives were to address the following questions:

1. What extent is imposter syndrome prevalent in third year nursing students?
2. What extent does clinical practice preparation have on the manifestation of imposter syndrome?

#### **Research methodology/research design, any ethical issues, and methods of data collection and analysis**

A total population sample of third year nursing students (n=46) from a regional polytechnic in the North Island of New Zealand were approached to complete a 42-item Likert scale questionnaire. The questionnaire used the Clance IP scale (n=20) and the preparedness for hospital placement questionnaire for nursing (PHPQN) (n=22). The response rate was 70% (n=32). The study received ethics approval.

#### **Key findings and recommendations**

Over 95% of respondents were female with an average age of 26 years. 19% of students self-disclosed as being NZ Maori with 3% being Asian and the remainder NZ European (78%). 53% of respondents identified as currently being in a relationship with over 30% of students being single. Mean IP score was 54.47 (normal <40) and mean PHPQN score was 33.75 (normal <44). Using Pearson's rho we found a weak positive correlation between IP scores and PHPQN ( $r = .307$ ,  $p = .87$ ) which suggests that as confidence increases so do feelings of imposterism. Parametric testing using ANOVA found no statistical difference between IP and PHPQN scores against age, gender, relationship or ethnicity.

Identification and measuring of confidence levels together with the presence of IP may guide the development of transition programmes that are directed to reducing the perceived feelings of self-doubt as manifested by IP. This would include confidence-building programmes that ready nursing students to the rigors of new graduate practice.

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#### **Key words:**

- preparation for registration
- imposter phenomenon
- transition shock
- student experience
- nurse education.

## **G2SEE-T5**

### **Angels and demons: Student nurse perceptions of mentorship in practice**

**Rebecca Bailey-McHale, Lecturer; Julie Bailey-McHale, Head of Department, University of Chester, UK**

#### **Background, including underpinning literature and, wherever possible, the international relevance of the research**

The importance of learning in practice is well established in pre-registration nurse education (Nursing and Midwifery Council, 2010). An important element of the facilitation of learning in practice is the role of the mentor. The seminal work of Darling (1984) established important qualities linked to this role. More recently this work has been replicated by a number of authors who have also demonstrated key characteristics (Bailey-McHale and Hart, 2013). It is less well established what student nurses prioritise as important qualities of effective mentorship. Furthermore, a number of studies have demonstrated issues with the quality of mentoring in pre-registration nursing. Duffy (2003) described the failure of mentors to fail students in practice when they did not meet the necessary competencies. Gainsbury (2010) in a later study

also found that despite the introduction of new learning and assessment in practice standards (Nursing and Midwifery Council, 2008) this was still an issue. There is little work comparing the expectations of student nurses of their mentor nor is there literature exploring the impact on the mentor of student nurse expectations.

The research project has three distinct phases, and the purpose of this abstract is to present the findings of phase one. Phase one uses visual methodology to produce images of mentors and the mentorship relationship of third year student nurses. A small group of student nurses worked with the researchers in the data analysis stage of phase one. Phase two used the data from phase one to facilitate discussion in a focus group setting with student mentors to explore the impact of the images on their practice as a mentor. Phase three presents both sets of data to a group of lecturers who deliver mentorship preparation programmes.

The project will also enhance understanding of the ways in which visual methods can be used as a pedagogic strategy to promote deep learning.

#### **Aim(s) and/or research question(s)/research hypothesis(es)**

The research aims to explore the impact of the mentoring relationship on student nurses, student mentors and lecturers delivering mentorship preparation programmes.

The following research questions were used to guide the project:

1. What are third year student nurses' perceptions of mentorship?
2. What impact do the visual images created by student nurses have on student mentors?
3. What are the potential implications for teaching mentorship?

#### **Research methodology/research design, any ethical issues, and methods of data collection and analysis**

The first phase of the research uses visual methodology to explore the perceptions of mentorship of a cohort of pre-registration third year student nurses. The students were asked to draw a picture of a mentor that reflected their ideas and experience of the mentoring relationship. This purposive sample included 40 students across all fields of nursing. This produced visual data that was then analysed by the researchers using Rose's (2012) three-step thematic framework. To increase trustworthiness an invited panel of third year student nurses were then asked to check the themes and generate ideas from their own review of the visual data generated. This analysis was recorded and initial themes adjusted accordingly.

#### **Key findings and recommendations**

A number of key findings arose from phase one of the project:

1. The mentoring relationship has a significant emotional impact on the student nurse.
2. The student mentor should be appropriately prepared to manage the strong emotional impact of the mentoring relationship.
3. Academics and mentors should consider the ways in which these experiences can facilitate transformative learning opportunities.

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#### **Key words:**

- mentorship
- student nurses
- practice education
- pedagogy
- visual methodology.

**3 key points to indicate how your work contributes to knowledge development within the selected theme:**

- the use of visual methodology to enhance pedagogic strategy
- enhancing the preparation of student mentors
- the emotional impact of the mentorship relationship on the student nurse.

**G2SEE-T6**

**A qualitative study exploring student nurses' perceptions of preparedness for caring for the acutely ill patient**

**Victoria Sparrow, MnurSci Fourth Year Student Nurse (From September 2016 - Staff Nurse, Acute Medicine);  
Nichola Ashby, Lead for Critical, Cardiac and Trauma Care, University of Nottingham, UK**

**Background, including underpinning literature and, wherever possible, the international relevance of the research**

When Lord Willis recently introduced the newly published Willis Commission Report for the Royal College of Nursing (2012), he asked the question, 'What essential features of pre-registration nursing education in the UK, what type of support for newly registered practitioners, are needed to create and maintain a workforce of competent, compassionate nurses fit to deliver future health and social care services?'.

With the transition now taken place to shift the focus of nursing towards evidence-based practice, a combination of both clinical practice experience and academia, will allow all new nurses to qualify with a degree level qualification. In line with this, the Nursing and Midwifery Council (2010) have produced standards for pre-registration, underlying the vitality of current nursing programmes being both appropriate and supportive, allowing autonomous practitioners to be developed who 'must be able to provide both essential and complex care to a very high standard using the best available evidence and technology where appropriate'.

Having experienced this transition within the nursing curriculum and observing first-hand an increased acuity of patients nursed in a ward environment, it is apparent that the amplifiable shift in the level of care needed by staff has a large impact on current nursing students' confidence, skills and knowledge in clinical practice, not only as a student but on qualification as a staff nurse.

Further research and curriculum evaluation is therefore a key part of improving nursing education, ensuring that newly qualified professionals feel competent to fulfil their roles. This research study will therefore be conducted in order to gain understanding of student nurse experiences of acute care. The potential contribution of this research is therefore to gain knowledge around student nurse understanding of acute care to raise awareness of the pre-registration nursing programme, its strengths and weaknesses and its potential in preparing students for caring for acutely ill patients post qualification. The findings may be appropriate for dissemination, helpful in guiding future research in this area and identifying further gaps in knowledge.

**Aim(s) and/or research question(s)/research hypothesis(es)**

The aims of the study were to:

- explore student nurses' perceptions of preparedness for caring for the acutely ill patient
- extrapolate and identify common themes within data to comparatively discuss factors affecting the care student nurses provide to acutely ill patients.

**Research methodology/research design, any ethical issues, and methods of data collection and analysis**

This qualitative research study was undertaken using a phenomenological method, through the use of individual interviews to explore individualised perceptions within the student nurse population. Six participants were interviewed from a single centre at the University of Nottingham. Participants were recruited from two pre-registration undergraduate nursing courses. Awareness of insider researcher issues were accounted for in gaining ethical consent initiation of the study. Interpretation of the results was undertaken using manual thematic analysis of transcribed data.

**Key findings and recommendations**

This study concluded that both exposure and experience were large factors in influencing student nurses' confidence in practice. Their level of knowledge varied dependent on the placements the student had undertaken. Many students felt the role of simulation and practical learning within university was invaluable, and evaluated that a wider range of scenario-based learning associated with different conditions would optimise learning further.

The underpinning of core acute care teaching within university pre-registration programmes to standardise student knowledge, increasing simulation-based learning to provide a supportive environment to practice skills. The importance of regular clinical supervision and feedback has been highlighted, to continue to tailor education programmes to the needs of the students in order to provide smooth transition into the newly qualified period.



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## Key words:

- nurse education
- acute/critical care
- qualitative research
- confidence.

## 3 key points to indicate how your work contributes to knowledge development within the selected theme:

- the ability of nursing programmes to train highly qualified competent professionals is an international issue
- understanding the educational experience gained by these participants will be fed back into the university in order to begin to evaluate success of the new pre-registration programme and make appropriate adjustments
- this study is one of few to explore perceptions of participants as opposed to competence in practice; therefore creates a way of exploring confidence as opposed to just fitness and competence to practice to enable a multidimensional approach to teaching.



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